

JCWSCS 10 JUN 2004

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**TELECOPY COVER SHEET**

*Equipment Operator Contact Number: (617) 310-8670. Please call if you do not receive all the pages.*

**Date:** June 9, 2004

**TO:** **Name:** Office of Initial Patent Examination  
**Company:** United States Patent & Trademark Office  
**Address:** Alexandria, VA 22313-1450  
**Telephone:**  
**Fax:** (703) 746-9195

**FROM:** **Sender:** Jackie Andreu for Jason P. Fiorillo, Esq.

**Number of Pages INCLUDING This Cover Sheet:** 10

**Client:** BKP-010  
(9615/11)

**Comments:** Request for Corrected Filing Receipt for USSN 10/759,375

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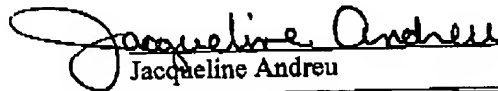
PATENT  
Attorney Docket No.: BKP-010  
(9615/11)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Sawan *et al.*  
SERIAL NO.: 10/759,375 GROUP NO.: 3739  
371(c) DATE: January 16, 2004 EXAMINER: Not yet assigned  
TITLE: CATHETER FOR TRANSDIAPHRAGMATIC PRESSURE AND  
DIAPHRAGM ELECTROMYOGRAM RECORDING USING  
HELICOIDAL ELECTRODES

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence, and any document(s) referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile No. (703) 746-9195 on this 9<sup>th</sup> day of June, 2004.

  
Jacqueline Andreu

Office of Initial Patent Examination  
Customer Service Center  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

- 1) Transmittal Form (1 pg.);
- 2) Request for Corrected Filing Receipt (2 pgs.);
- 3) Marked copy of the official Filing Receipt (2 pgs.); and
- 4) Application Data Sheet (3 pgs.)

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# TRANSMITTAL FORM

Application Serial Number	10/759,375
Filing Date	January 16, 2004
First Named Inventor	Sawan
Group Art Unit	3739
Examiner Name	Not yet assigned
Attorney Docket No.	BKP-010
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

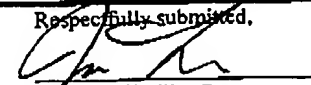
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form<br><br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]<br><br><input type="checkbox"/> Petition for Extension of Time<br><br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Form PTO-1449<br><input type="checkbox"/> Copies of IDS Citations<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Sequence Listing submission<br><input type="checkbox"/> Paper Copy/CD<br><input type="checkbox"/> Computer Readable Copy<br><input type="checkbox"/> Statement verifying identity of above | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application<br><br><input type="checkbox"/> Formal Drawing(s)<br><br><input type="checkbox"/> Request For Continued Examination (RCE) Transmittal<br><br><input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application<br><br><input type="checkbox"/> Small Entity Statement<br><br><input type="checkbox"/> CD(s) for large table or computer program<br><br><input type="checkbox"/> Amendment After Allowance<br><br><input type="checkbox"/> Request for Certificate of Correction<br><input type="checkbox"/> Certificate of Correction (in duplicate) | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences<br><br><input type="checkbox"/> Appeal Brief (in triplicate)<br><br><input type="checkbox"/> Status Inquiry<br><br><input type="checkbox"/> Return Receipt Postcard<br><br><input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8<br><br><input checked="" type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8<br><br><input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <ul style="list-style-type: none"> <li>• Request for Corrected Filing Receipt (2 pgs.)</li> <li>• Marked copy of official Filing Receipt (2 pgs.)</li> <li>• Application Data Sheet (3 pgs.)</li> </ul> |
|---|---|---|

### CORRESPONDENCE ADDRESS

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### SIGNATURE BLOCK

Date: June 9, 2004  
 Reg. No. 52,892  
 Tel. No.: (617) 310-8471  
 Fax No.: (617) 248-7100

Respectfully submitted,  
  
 Jason P. Fiorillo, Esq.  
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 125 High Street  
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3077482

PATENT  
Attorney Docket No.: BKP-010  
(9615/11)

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Sawan *et al.* CONFIRMATION NO.: 6713  
SERIAL NO.: 10/759,375 GROUP NO.: 3739  
FILING DATE: January 16, 2004 EXAMINER: Not yet assigned  
TITLE: CATHETER FOR TRANSDIAPHRAGMATIC PRESSURE AND  
DIAPHRAGM ELECTROMYOGRAM RECORDING USING  
HELICOIDAL ELECTRODES

Office of Initial Patent Examination  
Customer Service Center  
Commissioner for Patents  
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Alexandria, VA 22313-1450

## REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the Patent Office for the above-identified application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following data, which is:

☒ incorrectly entered

*and/or*

☐ omitted

### *Error In*

### *Correct Data*

1. ☒ Applicant's name
2. ☐ Applicant's address
3. ☒ Title

1. Mohamad Sawan
- 2.
3. Catheter for transdiaphragmatic pressure and diaphragm electromyogram recording using helicoidal electrodes

4. ☐ Filing Date
5. ☐ Serial Number
6. ☐ Foreign/PCT Application Re:
7. ☐ Other

- 4.
- 5.
- 6.
- 7.

*Request For Corrected Filing Receipt*  
*Serial No. 10/759,375*  
*Page 2 of 2*

Date: June 7, 2004  
Reg. No.: 52,892

Tel. No.: (617) 310-8471  
Fax No.: (617) 248-7100

Respectfully submitted,



Jason P. Fiorillo  
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3076649\_1



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

APPL NO.	FILING OR 371 (C) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/759,375	01/16/2004	3739	0.00	BKP-010	8	33	3

CONFIRMATION NO. 6713

021323

TESTA, HURWITZ & THIBEAULT, LLP  
 HIGH STREET TOWER  
 125 HIGH STREET  
 BOSTON, MA 02110

## FILING RECEIPT



\*OC000000012415539\*

Date Mailed: 04/22/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Mahamad Sawan, Laval, CANADA;  
 Francois Bellemare, Longueuil, CANADA;  
 Jerome Dido, Paris, FRANCE;  
 Tommy Desilets, Montreal, CANADA;

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2004

PATENT DEPARTMENT  
 TESTA, HURWITZ & THIBEAULT

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted: 04/21/2004

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

\*\* SMALL ENTITY \*\*

Title

Catheter for transdiaphragmatic pressure and diaphragm <sup>electro</sup>electromyogram recording using

helicoidal electrodes

Preliminary Class

607

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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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